NEW YORK NEUROLOGICAL SOCIETY.

THE REPORT OF THE STEVENS COMMISSION.

The commission appointed about two and a half years ago, by the New York Neurological Society, to investigate the methods pursued by Dr. George T. Stevens, in correction of ocular defects for cure of various nervous affections, made its report on Tuesday, November 5th. The commission consisted of Dr. Edward C. Seguin (chairman), Dr. M. Allen Starr (secretary), Dr. C. L. Dana, Dr. W. R. Birdsall, Dr. David Webster, Dr. Oliver Moore, and Dr. Frank Foster. The commission confined its work to the consideration of chorea and epilepsy.

The report, to say the least, was not flattering, in spite of a number of decided cases of improvement. Dr. Stevens protested against the commission's report as premature, and held that the investigation was improperly conducted and the results had not been fairly recorded in the report.

The discussion was postponed to the next meeting, December 3d.

A stated meeting of the New York Neurological Society will be held on Tuesday evening, December 3, 1889, at 12 West Thirty-first Street, at eight o'clock.

Order: 1. Presentation of a case of congenital bilateral pleuroplegia (abducens paralysis) with facial paralysis, by A. Schapringer, M.D. 2. Discussion on the report of the commission on the treatment of epilepsy and chorea by the correction of ocular defects. 3. A case of cervical paraplegia from dislocation, presentation of cord, by Christian C. Herter, M.D. 4. Neurotic tumors of the breast, by E. P. Fowler, M.D. George W. Jacoby, M.D., president; Frederick Peterson, M.D., 201 West Fifty-fourth Street, secretary.

AMERICAN NEUROLOGICAL ASSOCIATION TRANSACTIONS.

Dr. MORTON PRINCE, of Boston, presented a paper on

MALARIA AS A CAUSE OF DEGENERATIVE DISEASES OF THE SPINAL CORD. (*See page 585.*)

Dr. N. E. BRILL said that his attention had never before been directed to the possibility of such a relation, but he

thought the details presented were rather too meagre for an absolutely correct decision to be made in the matter. As neuritis and malaria were frequently associated, possibly some of these spinal cases might be coincident in the same manner. Both malarial and cord disorders are very common.

Dr. L. C. GRAY saw no reason why the malarial poison should not cause spinal diseases. We do not yet know the exact character of the poison. But there is a sort of periodicity in many spinal and cerebral disorders, as well as in peripheral nervous affections, which is often as marked as that of fever and ague. He had noticed this particularly in intracranial syphilis. Some of these neuropathies were even relieved by quinine, as he had observed in cases of tabes. When we speak of latent malaria and rest our diagnosis merely upon periodicity, there is danger of error. If Laveran and Councilman were right in their discovery of the malarial germ, this should be looked for in such cases as the author had described in order to corroborate with certainty the diagnosis. Improvement or recovery under the use of quinine was no criterion.

Dr. E. C. SPITZKA saw nothing in the nature of the case to forbid an etiological association between malaria and cord disorders, but he agreed with the preceding speakers that sufficient proof of such relation had not been adduced. To show an etiological significance, it was necessary to present absolute and intrinsic proof of it. If it could be shown that, as in syphilis, there were, at the time of the malarial attack, nervous symptoms, it would be a different matter. In the secondary fever of syphilis there was absence of the knee-jerk. Most nervous symptoms in malaria were of a neuralgic character. The anæsthesias differ from those of tabes. It had been found that pigmentary thrombosis and embolism were the most frequent causes of serious nervous disturbances in malaria. He believed, however, that, like any other cachexia, antecedent malaria might predispose to spinal affections. He had observed a case of paretic dementia of the tabetic type which was probably influenced etiologically by severe malaria.

Dr. H. M. LYMAN, of Chicago, could recall but two cases where it had been intimated to him that the origin of tabes had been malarial. In one he traced the actual cause to a subacute spinal meningitis coming on after exposure to wet and cold. The other case, instead of being true tabes, had proved to be a rheumatic neuritis. He had in his experience seen nothing to support the idea of a malarial etiology in tabes. A complete and perfect history, together with a microscopical examination of the blood, should be required for an indisputable diagnosis of malaria.

THE PRESIDENT could not recall a single case of tabes or multiple sclerosis which presented any relation to malaria.

Dr. PRINCE thought there could be no question as to the correctness of diagnosis as regarded the nervous symptoms in his cases; and as to the antecedent malaria, all of his cases were men who had been in army service, and he had documentary proof of their having suffered from that poison, in the shape of Government records. The really doubtful question was whether the malarial poison still existed in the system at the time of the development of spinal disorders. In some of them there was evidence of its persistence in the shape of typical malarial rigor and pyrexia. He did not consider his etiological explanation decisive, but merely suggestive.

Dr. SPITZKA thought that there were many cases of nervous disease owing their origin to exposure during the war which were contemptuously rejected by the Pension Bureau. It seemed to him that the Association ought to call the attention of the Government to the great injustice which might be done.

THE PRESIDENT, although once an army surgeon, and therefore prejudiced in favor of the soldiers, had been, on the contrary, struck by the vast number of fraudulent nervous cases which were awarded pensions.

Dr. W. M. Leszynsky, of New York, was then elected to active membership, and Mr. Victor Horsley and Dr. David Ferrier, of London, were elected to honorary membership. The resignation of Dr. A. D. Rockwell, of New York, was accepted.